Image# 13944074896 PAGE 1 / 42

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		dunonized Comm			Office Use Only
NAME OF TO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If to over the lines		12FE4M5	
American Health Care A	ssociation Politic	al Action Comn	nittee		
_ 			1 1 1 1		
ADDRESS (number and street)	1201 L Street, NW				
Check if different					
than previously reported. (ACC)	Washington			DC	20005
2. FEC IDENTIFICATION NUM	IBER ▼	CITY		STATE 🛦	ZIP CODE ▲
C C00006080	3.	IS THIS REPORT X	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	L .	Mar 20 (M3)	Jun 20 (M6)	Η.	20 (M9) X Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the	Primary (Convention		General (
October 15 Quarterly Report (Q3)	,		` '		
January 31 Year-End Report (YE)	Ele	ection on	/ D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the		30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	·	ection on	/ D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 11	01 201	3 throug	h 11	30	2013
I certify that I have examined this	Report and to the best	of my knowledge a	nd belief it is tru	ue, correct and	I complete.
Type or Print Name of Treasurer	Ms. Robin Hillier				
Signature of Treasurer Ms. Ro	bin Hillier	[Electroni	cally Filed]	Date 12	18 2013
NOTE: Submission of false, erroneo	us, or incomplete informa	ation may subject the	person signing the	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: 11 01 2013 To: 11 30 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		287615.28
	(b) Cash on Hand at Beginning of Reporting Period	455006.07	
	(c) Total Receipts (from Line 19)	68278.83	881196.65
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	523284.90	1168811.93
7.	Total Disbursements (from Line 31)	66442.89	711969.92
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	456842.01	456842.01
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Health Care Association Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	20222 24	011075 50
(i) Itemized (use Schedule A)	62003.01	811975.58
(ii) Unitemized	1275.82	29583.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	63278.83	841559.27
Lines Tr(a)(i) and (ii)	, 00210.00	7
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	00500.00
(such as PACs)	0.00	22500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	00070 00	864059.27
Totals to Line 33, page 5)	63278.83	004059.27
Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
All Loans Received	0.00	0.00
All Loans neceived		3 3
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	, , , , ,	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	1931.13
Refunds of Contributions Made	7	7
to Federal Candidates and Other		
Political Committees	5000.00	14000.00
Other Federal Receipts	0000.00	
(Dividends, Interest, etc.)	0.00	1206.25
Transfers from Non-Federal and Levin Funds	0.00	1200.20
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
,	7	4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(5) 20711 1 dride (iloni delleddie 110)	7	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	68278.83	881196
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	68278.83	881196.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operatir	ng Expenditures: —	10101 11110 1 61100	Calcilual Teal-10-Date
	ocated Federal/Non-Federal ivity (from Schedule H4)		
(i)	Federal Share	0.00	0.00
(ii)	Non-Federal Share	0.00	0.00
	er Federal Operating	1202.00	45690.69
	pendituresal Operating Expenditures	1292.89	15680.68
	d 21(a)(i), (a)(ii), and (b))▶	1292.89	15680.68
	rs to Affiliated/Other Party		
	tees	0.00	0.00
 Contribution 	Itions to Candidates/Committees		
	er Political Committees	65000.00	650132.99
-	dent Expenditures	0.00	0.00
	hedule E)ated Party Expenditures	0.00	0.00
(2 U.S.C	C. §441a(d)) hedule F)	0.00	0.00
(use sc	nedule F)	7 7	0.00
6 Loan Re	epayments Made	0.00	0.00
o. Louii iii	paymone made		
7. Loans N	//ade	0.00	0.00
Refunds	of Contributions To: ividuals/Persons Other		
Tha	an Political Committees	150.00	29650.00
	itical Party Committees	0.00	0.00
(-)	ner Political Committees	0.00	0.00
(Su	ch as PACs)	0.00	0.00
(d) Tota	al Contribution Refunds		
(-)	d Lines 28(a), (b), and (c))▶	150.00	29650.00
,			
9. Other D	isbursements	0.00	16506.25
	_		
	Election Activity (2 U.S.C. §431(20))		
. ,	ocated Federal Election Activity		
	m Schedule H6)	0.00	0.00
(1)	Federal Share	7	
(ii)	"Levin" Share	0.00	0.00
` '	deral Election Activity Paid Entirely		
. ,	With Federal Funds	0.00	0.00
(c) Total	al Federal Election Activity (add		
Lir	nes 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	sbursements (add Lines 21(c), 22,		
23, 24,	25, 26, 27, 28(d), 29 and 30(c))	66442.89	711969.92
) Total Fa	deral Disbursements		
	t Line 21(a)(ii) and Line 30(a)(ii)		
	ie 31)	66442.89	711969.92
		7	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	63278.83	864059.27
4. Total Contribution Refunds (from Line 28(d))	150.00	29650.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63128.83	834409.27
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1292.89	15680.68
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1931.13
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1292.89	13749.55

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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	(check only one)							
	X 11a	11b	11c	12				
	13	14	15	16	17			

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) A. Robert Asztalos		Date of Receipt
Mailing Address 5013 Centennial Oak Circle		11 18 _ 2013 _
City Tallahassee	State Zip Code FL 32308	Transaction ID : C2499954 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	128.13
Name of Employer Asztalos & Associates Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 512.50	_
Full Name (Last, First, Middle Initial) Gary Attman Mailing Address 8028 Ritchie Highway		Date of Receipt
City Pasadena	State Zip Code MD 21122-1069	Transaction ID : C2499958 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1250.00
Name of Employer LAG Associates LP Managers	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) C. Mark Ballif		Date of Receipt
Mailing Address 100 E San Marcos Blvd Suite 200		11 11 2013
City San Marcos	State Zip Code CA 92069	Transaction ID : C2485032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2500.00
Name of Employer	Occupation	-
Plum Healthcare Receipt For: □ Primary □ General □ Other (specify) ▼	CEO Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional).		3878.13
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITE

FOR LINE NUMBER: PAGE 7

OF

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EMIZED RECEIPTS	for each category of the Detailed Summary Page	`-	ck only 11a 13	one) 11b 14	11c		12 16		17
y information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the p	purpose	of soliciting	g coi	ntribut	ions	

An or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Harry Baum Date of Receipt Mailing Address 10315 Johnson Drive 2013 11 28 City State Zip Code Transaction ID: C2499780 KS Shawnee 66203 Amount of Each Receipt this Period FEC ID number of contributing C 625.00 federal political committee. Name of Employer Occupation Sharon Lane Health Services Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Bedinger Date of Receipt Mailing Address 1127 East 16th Avenue 11 2013 11 City State Zip Code Transaction ID: C2485031 CO Denver 80218-1506 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Colavria Hospitality President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ken Beebe Jr. Date of Receipt Mailing Address 571 Highway 51 M = M / 2013 11 18 City State Zip Code Transaction ID: C2499951 MS Ridgeland 39157-2597 Amount of Each Receipt this Period FEC ID number of contributing 275.00 С federal political committee. Name of Employer Occupation Legacy Care Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 825.00 Other (specify) 1400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NU	IMBER	:	PAGE	8	OF	42
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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associate	ion Political Action Committee	
Full Name (Last, First, Middle Initial) Brad Bilbo Mailing Address 527 Charlotte Lane City Bremen FEC ID number of contributing federal political committee. Name of Employer Cypress Health Group Receipt For: Primary General Other (specify)	State Zip Code GA 30110 C Occupation Regional Vice President Aggregate Year-to-Date ▼ 500.00	Date of Receipt 11 01 2013 Transaction ID: C2458092 Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) Linda Black-Kurek Mailing Address 7445 Liberty Woods Lane City Dayton FEC ID number of contributing federal political committee. Name of Employer Liberty Health Care Corporation Receipt For: Primary General Other (specify) Other (specify)	State Zip Code OH 45459 C Occupation President Aggregate Year-to-Date ▼ 5000.00	Date of Receipt 11 06 2013 Transaction ID: C2460979 Amount of Each Receipt this Period 1875.00
Full Name (Last, First, Middle Initial) Steve Boymel Mailing Address 12100 Reed Hartman Highwa City Cincinnati FEC ID number of contributing federal political committee. Name of Employer Brookwood Retirement Community Receipt For: Primary General Other (specify)	State Zip Code OH 45241-6036 C Occupation Owner/Administrator Aggregate Year-to-Date 1100.00	Date of Receipt 11 27 2013 Transaction ID: C2500008 Amount of Each Receipt this Period 1100.00
SUBTOTAL of Receipts This Page (optional)	>	3100.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s)

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Elizabeth Casey Date of Receipt Mailing Address 3075 E Thousand Oaks Blvd 2013 11 18 City State Zip Code Transaction ID: C2499949 CA Westlake Village 91362-3402 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation The Chase Group Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Phil Chase Date of Receipt Mailing Address 3075 E Thousand Oaks Blvd 11 18 2013 City State Zip Code Transaction ID: C2499946 **Thousand Oaks** CA 91362-3402 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation The Chase Group Nursing Home Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan Chase Date of Receipt Mailing Address 5374 Long Shadow Ct 2013 11 18 State Zip Code Transaction ID: C2499948 CA Westlake Village 91362-5223 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Partner The Chase Group Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	: PAGE	E 10 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associa	tion Political Action Committee	
Full Name (Last, First, Middle Initial) Steven E. Chies Mailing Address 7651 Old Central Ave NE City Fridley FEC ID number of contributing federal political committee. Name of Employer Benedictine Health Services Receipt For: Primary General Other (specify)	State Zip Code MN 55432 C Occupation VP, Long Term Care Services Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 11 26 2013 Transaction ID: C2499298 Amount of Each Receipt this Period 375.00
Full Name (Last, First, Middle Initial) Margaret Connorton Mailing Address 1600 S. Eads Street Apt. 123 City Arlington FEC ID number of contributing federal political committee. Name of Employer	State Zip Code VA 22202 C Occupation	Date of Receipt 11 27 2013 Transaction ID: C2500009 Amount of Each Receipt this Period 26.10
American Health Care Association Receipt For: Primary General Other (specify) ▼	Manager, LTC Trend Tracker Aggregate Year-to-Date ▼ 274.05	* Payroll Deduction: \$13.05 Bi-Weekly
Full Name (Last, First, Middle Initial) Helen Crunk Mailing Address 1208 N 14th Street City Nebraska City FEC ID number of contributing federal political committee. Name of Employer Mable Rose Estates Receipt For: Primary General Other (specify)	State Zip Code NE 68410 C Occupation Administrator Aggregate Year-to-Date ▼	Date of Receipt 11
SUBTOTAL of Receipts This Page (optional)	>	526.10
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Richard Erb Date of Receipt Mailing Address 35 Melden Drive 07 2013 11 City Zip Code State Transaction ID: C2463461 ME Brunswick 04011 Amount of Each Receipt this Period FEC ID number of contributing C 330.00 federal political committee. Name of Employer Occupation CEO Maine Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joanne E Erickson Date of Receipt Mailing Address 911 S Randolph St 2013 11 27 City State Zip Code Transaction ID: C2500011 VA Arlington 22204-1564 Amount of Each Receipt this Period FEC ID number of contributing 95.24 federal political committee. Name of Employer Occupation American Health Care Association Editor in Chief, Provider Magazine Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$47.62 Bi-Weekly 904.78 Other (specify) Full Name (Last, First, Middle Initial) c. Irene Fleshner Date of Receipt Mailing Address 1688 Floyd Street 11 80 2013 City State Zip Code Transaction ID: C2483411 FL Sarasota 34239 Amount of Each Receipt this Period FEC ID number of contributing 206.25 С federal political committee. Name of Employer Occupation Genesis HealthCare Corporation Nurse Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 631.49 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 12 OF 42 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Geoffrey Fraser Date of Receipt Mailing Address 709 South Harbor City Boulevard Suite 240 19 2013 11 City State Zip Code Transaction ID: C2496705 FL Melbourne 32901 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation Clear Choice Health Care, LLC Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Karen Goldsmith Date of Receipt Mailing Address PO Box 875 11 26 2013 City State Zip Code Transaction ID: C2499361 FL Cape Canaveral 32920 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Goldsmith & Grout PA Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. William J. Griffith Date of Receipt Mailing Address 1421 T Street, NW 11 27 2013 Apt. #1 City State Zip Code Transaction ID: C2500012 DC Washington 20009 Amount of Each Receipt this Period FEC ID number of contributing 34.80 С federal political committee. Name of Employer Occupation American Health Care Association Manager, Political Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$17.40 Bi-Weekly 365.40 Other (specify) 1784.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

Use separate schedule(s) for each category of the Detailed Summary Page

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ı	FOR LIN	NE NU	IMBER	:	PAGE	1	13 OF	42
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	13		14		15		16	17

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Associa	tion Political Action Committee	
Full Name (Last, First, Middle Initial) Jennifer S Hahs		Date of Receipt
Mailing Address 12423 Flint Street		11 27 2013
City Overland Park	State Zip Code KS 66213	Transaction ID : C2500013 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	86.96
Name of Employer American Health Care Association Receipt For: Primary General Other (specify) ▼	Occupation Director, Political Affairs Aggregate Year-to-Date ▼ 913.08	* Payroll Deduction: \$43.48 Bi-Weekly
Full Name (Last, First, Middle Initial) Gerald Hamilton Mailing Address 7612 Rio Penasco Court NW		Date of Receipt
City Albuquerque	State Zip Code NM 87120	Transaction ID : C2485033 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer R&G Healthcare Management	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Robin L. Hillier		Data of Receipt
Mailing Address 4433 Pebble Creek Ln		Date of Receipt 11 20 2013
City Long Grove	State Zip Code IL 60047-5283	Transaction ID : C2497333 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	
Lake Point Rehab and Nursing Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Owner Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)		1586.96
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) David Jacobs Date of Receipt Mailing Address 2145 Great Elm Lane 2013 11 13 City State Zip Code Transaction ID : C2486350 Highland Park IL 60035 Amount of Each Receipt this Period FEC ID number of contributing C 143.00 federal political committee. Name of Employer Occupation Senior VP, Sales Medline Industries Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 858.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheryl Killian Date of Receipt Mailing Address 3801 Woodside Dr 11 26 2013 City State Zip Code Transaction ID: C2513915 TX Arlington 76016-3030 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Legacy Care Centers Inc. President Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) c. David A Kyllo Date of Receipt Mailing Address 4621 28th Road South 2013 11 27 City Zip Code State Transaction ID: C2500066 Arlington VA 22206 Amount of Each Receipt this Period FEC ID number of contributing 266.66 С federal political committee. Name of Employer Occupation National Center for Assisted Living **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$133.33 Bi-Weekly 2233.29 Other (specify) 434.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

	FOR LIN	IE NUMBEF	₹:	PAGE	15	OF	42
Use separate schedule(s) for each category of the Detailed Summary Page	(check o	<i>'</i>		11c	12		¬
	1 113	1 114	1	15 I	116	i I	11/

17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Larry Lane Date of Receipt Mailing Address 1616 Stephens Dr 2013 11 18 City State Zip Code Transaction ID: C2499955 PΑ Wayne 19087-1023 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Sr VP, Regulatory Affairs Genesis Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Bruce Levering Date of Receipt Mailing Address 6180 Sparta Road 2013 11 18 City State Zip Code Transaction ID: C2499961 Fredericktown OH 43019 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Levering Management CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lee Marchant Date of Receipt Mailing Address 3800 West Gifford Road 2013 11 21 City State Zip Code Transaction ID: C2499983 IN Bloomington 47403-2612 Amount of Each Receipt this Period FEC ID number of contributing 1100.00 С federal political committee. Name of Employer Occupation President LJM Enterprises Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 3100.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 42 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Bethany R Martino Date of Receipt Mailing Address 8559 Window Latch Way 2013 11 27 City Zip Code State Transaction ID: C2500067 MD Columbia 21045 Amount of Each Receipt this Period FEC ID number of contributing C 156.54 federal political committee. Name of Employer Occupation Vice President, Public Affairs American Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$78.27 Bi-Weekly 1643.67 Other (specify) Full Name (Last, First, Middle Initial) B. Cyndi Milenski Date of Receipt Mailing Address 40 Brentmeade Drive 11 26 2013 City State Zip Code Transaction ID: C2500002 TN Jackson 38305 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Cornerstone Health Services Group Owner/President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Arlene Miles Date of Receipt Mailing Address 6061 S. Brook Valley Way 11 05 2013 City Zip Code State Transaction ID: C2499992 CO Centennial 80121 Amount of Each Receipt this Period FEC ID number of contributing 550.00 С federal political committee. Name of Employer Occupation President/CEO Colorado Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 956.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Gregory Miller Date of Receipt Mailing Address 11573 Stablewatch Court 07 2013 11 City Zip Code State Transaction ID: C2463430 OH Cincinnati 45249 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Vice President, Operations Health Care Management Group Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Morton Date of Receipt Mailing Address 415 Rogers Avenue 11 18 2013 City State Zip Code Transaction ID: C2499956 Fort Smith AR 72901-1903 Amount of Each Receipt this Period FEC ID number of contributing 1875.00 federal political committee. Name of Employer Occupation Central Arkansas Nursing Centers Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Roberts T. Nelson Date of Receipt Mailing Address 3075 E Thousand Oaks Blvd 2013 11 18 State Zip Code Transaction ID: C2499950 CA Westlake Village 91362-3402 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 С federal political committee. Name of Employer Occupation Partner The Chase Group Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 3375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Timothy F Nicholson Date of Receipt Mailing Address 15 Ocean Harbour Cir 2013 11 21 City State Zip Code Transaction ID: C2497896 FL Ocean Ridge 33435-6207 Amount of Each Receipt this Period FEC ID number of contributing C 1875.00 federal political committee. Name of Employer Occupation President/CEO Lvric Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Julie C Painter Date of Receipt Mailing Address 5023 Waple Ln 2013 11 27 City State Zip Code Transaction ID: C2500068 VA Alexandria 22304-7727 Amount of Each Receipt this Period FEC ID number of contributing 43.48 federal political committee. Name of Employer Occupation American Health Care Association Vice President of Constituency Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$21.74 Bi-Weekly 456.54 Other (specify) Full Name (Last, First, Middle Initial) c. Mark V Parkinson Date of Receipt Mailing Address 8930 Harvest Square Ct 11 27 2013 City Zip Code State Transaction ID: C2500069 MD Potomac 20854-4475 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation President and CEO American Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$200.00 Bi-Weekly 4800.00 Other (specify) 2318.48 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Christopher Parks Date of Receipt Mailing Address 1730 Truro Rd 2013 11 27 City Zip Code State Transaction ID: C2500070 MD Crofton 21114-2520 Amount of Each Receipt this Period FEC ID number of contributing 43.48 federal political committee. Name of Employer Occupation American Health Care Association Director of IT and Operations Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$21.74 Bi-Weekly 476.54 Other (specify) Full Name (Last, First, Middle Initial) B. Denise T. Pozderac Date of Receipt Mailing Address 6721 Grafton Rd 11 26 2013 City State Zip Code Transaction ID: C2500001 OH 44280-9705 Valley City Amount of Each Receipt this Period FEC ID number of contributing 110.00 federal political committee. Name of Employer Occupation Transitional Living Centers Inc. Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Katherine Preede Date of Receipt Mailing Address 1200 S Courthouse Road 11 27 2013 Apt 428 City Zip Code State Transaction ID: C2500071 Arlington VA 22204 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation AHCA/NCAL Director, Membership & Business Develo Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$20.00 Bi-Weekly 420.00 Other (specify) 193.48 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Mohammad Qazi Date of Receipt Mailing Address 4000 Town Center Suite 700 2013 11 21 City State Zip Code Transaction ID: C2499994 Southfield MI 48075 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation CEO Ciena Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sally Rapp Date of Receipt Mailing Address 3308 Ocean Blvd 11 80 2013 City State Zip Code Transaction ID: C2483410 CA Corona Del Mar 92625 Amount of Each Receipt this Period FEC ID number of contributing 1750.00 federal political committee. Name of Employer Occupation Sr Administrative Services Inc CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Rau Date of Receipt Mailing Address 3876 S. Oakbrook Dr. 11 26 2013 City Zip Code State Transaction ID: C2499297 WI Greenfield 53228-2140 Amount of Each Receipt this Period FEC ID number of contributing 274.50 С federal political committee. Name of Employer Occupation CEO Clement Manor Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 7024.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Stephen Reissman Date of Receipt Mailing Address 5120 W Goldleaf Circle Suite 400 2013 11 City State Zip Code Transaction ID: C2500000 CA Los Angeles 90056-1297 Amount of Each Receipt this Period FEC ID number of contributing 3750.00 federal political committee. Name of Employer Occupation President/CEO Country Villa Health Services Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Floyd Rhoades Date of Receipt Mailing Address 45325 Santa Fe Cove 11 18 2013 City State Zip Code Transaction ID: C2495118 Indian Wells CA 92210 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation Vista Cove Senior Living, Inc. CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Carol Rolf Date of Receipt Mailing Address 30100 Chagrin Boulevard 11 18 2013 City Zip Code State Transaction ID: C2499957 OH Cleveland 44124 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation President & Partner Rolf & Goffman Co., LPA Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 9000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 22 OF 42 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Leonard Russ Date of Receipt Mailing Address 40 Keogh Lane 06 2013 11 City Zip Code State Transaction ID: C2460983 NY New Rochelle 10805 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Skilled Nursing Facility Owner & Admin Bayberry Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Floyd Schlossberg Date of Receipt Mailing Address 4200 W Peterson Ave # 140 2013 11 27 City State Zip Code Transaction ID: C2500005 IL Chicago 60646-6819 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Alden Management Inc President Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ina Schlossberg Date of Receipt Mailing Address 4200 W Peterson Ave 2013 11 27 # 140 City State Zip Code Transaction ID: C2500004 IL Chicago 60646-6819 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation **Special Operations** Alden Management, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 6250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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	13		14		15		16	;	17

	Statements may not be sold or used by any personal he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Gerald Schroer Jr.		Date of Receipt
Mailing Address 1608 Muirfield NW		11 18 2013
City Canton	State Zip Code OH 44708	Transaction ID : C2495119 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer TSG Ancillaries Receipt For: Primary General Other (specify) ▼	Occupation Healthcare Executive Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Shawn Scott Mailing Address One Medline Place		Date of Receipt 11 20 2013
City Mundelein	State Zip Code IL 60060	Transaction ID : C2497334 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Medline	Occupation Senior VP HC Corporate Sales	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Christina L Sharp		Date of Receipt
Mailing Address 1644 Mount Eagle PI		11 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Alexandria	State Zip Code VA 22302-2121	Transaction ID : C2500074 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	21.74
Name of Employer American Health Care Association	Occupation Director, Member Relations	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.27	* Payroll Deduction: \$10.87 Bi-Weekly
SUBTOTAL of Receipts This Page (optional).	>	1521.74
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	ation Delitical Astissa County	
/ American Health Care Associ	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Jennifer S Shimer		Date of Receipt
Mailing Address 9507 Shelly Krasnow Ln		1,1 27 2013
City	State Zip Code	Transaction ID : C2500075
Fairfax	VA 22031-4720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	86.96
Name of Employer	Occupation	†
American Health Care Association	coo	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		* Payroll Deduction: \$43.48 Bi-Weekly
Other (specify) ▼	913.08	
Full Name (Last, First, Middle Initial) 3. Philip Small		Date of Receipt
Mailing Address 5150 Tirnanoe Cove		11 18 _2013 _
City	State Zip Code	Transaction ID : C2494651
Virginia Beach	VA 23451	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	333.00
Name of Employer	Occupation	Ì
UHS-Pruitt	CFO	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	1
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Elise Smith		Date of Receipt
Mailing Address 2022 Columbia Rd NW		11 27 2013
City	State Zip Code	Transaction ID : C2500076
Washington	DC 20009-1323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	-
American Health Care Association	VP Reimbursement	1
Receipt For:	Aggregate Year-to-Date ▼	Ì
Primary General	000.00	* Payroll Deduction: \$50.00 Bi-Weekly
Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional)		519.96
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TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Peter Van Runkle Date of Receipt Mailing Address 55 Green Meadows Drive S. 2013 11 13 City Zip Code State Transaction ID : C2486392 OH Lewis Center 43035 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Associate Executive **OHCA** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jack Vetter Date of Receipt Mailing Address 20220 Harney Street 11 18 2013 City State Zip Code Transaction ID: C2499962 NE Elkhorn 68022 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation Vetter Health Services President Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Wehner Date of Receipt Mailing Address 5155 North High Street 11 18 2013 City Zip Code State Transaction ID: C2499952 OH Columbus 43214 Amount of Each Receipt this Period FEC ID number of contributing 137.25 С federal political committee. Name of Employer Occupation Chief Financial Officer Wesley Glen Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 1637.25 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Nile Whitney Date of Receipt Mailing Address 4700 Village Green Drive 2013 11 26 City State Zip Code Transaction ID: C2499997 CA El Dorado Hills 95762 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Medline Industries Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christine Wilson Date of Receipt Mailing Address 1201 L Street NW 2013 11 27 City State Zip Code Transaction ID: C2500077 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 43.48 federal political committee. Name of Employer Occupation **AHCA** Sr. Manager, Business Systems Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$21.74 Bi-Weekly 456.54 Other (specify) Full Name (Last, First, Middle Initial) c. Michael Wylie Date of Receipt Mailing Address 205 Fairview Road 11 20 2013 City State Zip Code Transaction ID: C2497336 PΑ Clarks Green 18411 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation VP Development Genesis Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 318.48 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Michael Wylie Date of Receipt Mailing Address 205 Fairview Road 2013 11 21 City State Zip Code Transaction ID: C2499985 PΑ Clarks Green 18411 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation VP Development Genesis Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Colonial Manor Properties Date of Receipt Mailing Address P.O. Box 1438 11 06 2013 City State Zip Code Transaction ID: C2499942 Winnfield LA 71483 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jamie Shelton Date of Receipt Mailing Address PO Box 1438 11 06 2013 City State Zip Code Transaction ID: C2499945 LA Winnfield 71483 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation COO Central Management Company Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 5000.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

28 OF 42 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Fair Oaks Properties LLC Date of Receipt Mailing Address P.O. Box 1438 06 2013 11 City Zip Code State Transaction ID: C2499943 Winnfield LA 71483 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Teddy Rae Price Date of Receipt Mailing Address PO Box 1438 11 06 2013 City State Zip Code Transaction ID: C2499944 Winnfield LA 71483-1438 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Central Management Company, LLC Owner Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Trend Consultants Date of Receipt Mailing Address 323 Highland Boulevard 11 21 2013 City Zip Code State Transaction ID: C2499990 MS Natchez 39120 Amount of Each Receipt this Period FEC ID number of contributing 1445.44 С federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 3554.56 Other (specify) 3945.44 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

		R LINE	NU	IMBER	:	PAGE	2	29 OF	42
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Use separate schedule(s) for each category of the Detailed Summary Page	>	X 11a 11b						12	
		13		14		15		16	17

		10 11 10 10
NAME OF COMMITTEE (In Full)		
,	ation Political Action Committee	
/		
Full Name (Last, First, Middle Initial)		
A. Bruce Kelly		Date of Receipt
Mailing Address 323 Highland Blvd	Name (Last, First, Middle Initial) In part of Contributing al political committee Name (Last, First, Middle Initial) In part of Contributing al political committee. In part of Contributing al political committee. In part of Consultants In part of Contributing al Consultants In part of Contributing al Consultants In part of Consultants In part of Contributing al Consultants In part of Contributing al political committee. In part of Contributing al political commit of Contributing al political commit of Contribu	
City	State Zin Code	11 21 2013
City Natchez	•	Transaction ID : C2499991
	00120 4000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1445.44
Name of Employer	Occupation	_
Trend Consultants	· ·	
Receipt For:		[MEMO ITEM]
		*
Other (specify) ▼		
Full Name (Last, First, Middle Initial)		
	a inuvision ivianagement	Date of Receipt
Mailing Address 5310 NW 33rd Ave		M = M / D = D / Y = Y = Y
Ste 211 City	State 7in Code	11 26 2013
Fort Lauderdale		Transaction ID : C2499998
	. – 55505-0518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	_
Receipt For:	Aggregate Year-to-Date ▼	
		PARTNERSHIPpartners below if itemized
Otner (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial)		
Andrew S Weisman		Date of Receipt
Mailing Address 5310 NW 35th Ave Ste 211		11 26 2013
City		Transaction ID : C2499999
Fort Lauderdale	FL 33309-6314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	
NuVision Management	Chief Executive Officer	
Receipt For:		[MEMO ITEM]
Primary General		*
Other (specify) ▼	2556.32	
CURTOTAL of Provints This Provints III	ı	1250.00
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TOTAL This Period (last page this line number	er only)	62003.01

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SCHEDULE A (FEC Form 3	X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 OF 42 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Asso	ciation Polition	cal Action Committee	
Full Name (Last, First, Middle Initial) FRIENDS OF JEANNE SHAHEE Mailing Address 105 N STATE STREET	N		Date of Receipt
City	State	Zip Code	11 18 2013 Transaction ID : C2499953
FEC ID number of contributing federal political committee.	C co	03301 0457325	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	1	
Receipt For: 2008 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	Refund of 12/11/2008 Debt Retirement Contribution
Full Name (Last, First, Middle Initial) 3.	I		Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)	I		Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]
SUBTOTAL of Receipts This Page (option	al))	5000.00

TOTAL This Period (last page this line number only).....

5000.00

S	CHEDULE B (FEC Form 3X)			FOF	FOR LINE NUMBER: PAGE 31 OF 42						
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(che	ck only	one)			04 -		
			Summary Page		21b 27	22 28a	23 28b		24 28c	25 29	26 30b
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	for commercial purposes, other than using the nam										
\setminus	NAME OF COMMITTEE (In Full)										
	American Health Care Association	Political	Action Cor	nmitte	e						
^	Full Name (Last, First, Middle Initial)					D-4-	f Diele				
A.	American Express						f Disbur				
	Mailing Address PO Box 53773					11	/ D	01		2013	Y
	City	State	Zip Code			Trong	notion I	D . D44	50049		
	Phoenix	AZ	85072-3773			irans	saction I	יוט : טו:	00948		
	Purpose of Disbursement Credit Card Processing Fees					Amoun	t of Eac	h Disbı	urseme	nt this	Period
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		nent For: Primary Other (spec	General								
	State: District:	(-I	<i>√</i> •								
	Full Name (Last, First, Middle Initial)										
В.	American Express					Date o	f Disbur	sement		Y = Y	Υ
	Mailing Address PO Box 53773					11	J. L	12	L	2013	
	Phoenix	State AZ	Zip Code 85072-3773			Trans	saction	ID : D1	50949		
	Purpose of Disbursement Credit Card Processing Fees					Amoun	t of Eac	h Disbı	urseme	nt this	Period
	Candidate Name			Categ Typ			-		,	10	1.00
		nent For: Primary Other (spec	General cify) ▼								
_	Full Name (Last, First, Middle Initial)										
C.	American Express						f Disbur				V -
	Mailing Address PO Box 53773					1 <u>1</u> 1		15		2013	Y
		State AZ	Zip Code 85072-3773			Trans	saction	ID : D1	50950		
	Purpose of Disbursement				-						
	Credit Card Processing Fees Candidate Name			Categ Typ		Amoun	t of Eac	h Disbı	urseme		Period 7.88
	Office Sought: House Disbursen	nent For:		тур			- 1		7		
		Primary	General								
		Other (spec	cify) 🔻								
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SCHEDULE B (FEC Form 3X)			NUMBER	l:			PAGE	32	OF	42				
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\setminus	NAME OF COMMITTEE (In Full)													
	American Health Care Association	Political A	Action Con	nmitte	е									
_	Full Name (Last, First, Middle Initial)													
Α.	American Express						Date o	of Di	sburse			Y Y	Y	
	Mailing Address PO Box 53773						11	_	1	8		2013		
			Zip Code				Tran	sact	ion ID	: D	150951			
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	Credit Card Processing Fees						Amour	nt of	Each	Disl	ourseme	ent this	Perio	od
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	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (specif	fy) ▼											
_	State: District:					_								
_	Full Name (Last, First, Middle Initial)						Б.							
В.	American Express						Date o	וט זכ						
	Mailing Address PO Box 53773						11	/		2	/ Y	2013	Y	
	City S	State AZ	Zip Code 85072-3773				Tran	sact	ion ID	: D	150952			
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	Candidate Name			Categ	onu									
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	Office Sought: House Disbursen	nent For:												
		Primary	General											
	President State: District:	Other (specif	fy) ▼											
_	Full Name (Last, First, Middle Initial)													
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	Mailing Address PO Box 53773						11	/	2		/ Y	2013	Y	
	City	State	Zip Code			+								
		AZ	85072-3773				Tran	sact	ion ID	: D	150953			
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		Primary	General											
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	State: District:	(3600)	<i>></i> / ▼											
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S	CHEDULE B (FEC Form 3X)			FOR	LINE I	NUMBER:			PAGE	33 (OF 42
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	· · —	ck only				, –	7.5	06
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\setminus	NAME OF COMMITTEE (In Full)										
$ \rangle$	American Health Care Association	Politica	I Action Cor	nmitte	e 						
_	Full Name (Last, First, Middle Initial)	•				Date of Disbursement					
A.	American Express						_				
	Mailing Address PO Box 53773							11 / 26 / 2013			
	City	State	Zip Code			Trans	ootion I	D . D450	0E4		
	Phoenix	AZ	85072-3773			irans	action i	D : D150	954		
	Purpose of Disbursement Credit Card Processing Fees					Amoun	t of Eac	h Disbur	semer	nt this	Period
	Candidate Name			Catego Type			7		,	3	3.94
	Office Sought: House Disburser Senate	nent For: Primary	General								
	President	Other (spe	cify) ▼								
_	State: District:										
D	Full Name (Last, First, Middle Initial)					Doto of	f Disburs	omont			
B. BB&T Merchant Services							_		V	Y	V
	Mailing Address PO Box 200					M M	/ B	15		2013	Y
	City Silver Silv	State NC	Zip Code 27894-0200			Trans	saction I	D : D150	955		
	Purpose of Disbursement Credit Card Processing Fees				\neg	Amoun	t of Eac	h Disbur	semer	nt this	Period
	Candidate Name			Catego					,	333	3.62
	Office Sought: House Disbursen	nent For:									
	Senate	Primary	General								
	President State: District:	Other (spe	cify) 🔻								
_	Full Name (Last, First, Middle Initial)										
C.	BB&T						f Disburs				
	Mailing Address 1099 New York Ave NW					M M M		21		2013	Υ
	Ste 100					- ''	4 -			-5.0	
	•	State	Zip Code			Trans	saction I	D : D150	946		
	Washington Purpose of Disbursement	DC	20001-4452								
	Bank Fees					Amoun	t of Fac	h Disbur	semer	nt this	Period
	Candidate Name			Catego				2.0001			1.44
	Office Sought: House Disburser	nent For:					-		,		
	Senate	Primary	General								
	President	Other (spe	cify) 🔻								
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s	SUBTOTAL of Disbursements This Page (optional)				·· •		-		,	652	2.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 34 OF	42
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only		74
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	Detailed Summary Page	27	28a 28b 28c 29	30b
Any information copied from such Reports and State	ments may not be sold or us	ed by any ners	on for the purpose of soliciting contribution	ns
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
American Health Care Association	Political Action Con	nmittee		
/				
Full Name (Last, First, Middle Initial)				
A. BB&T			Date of Disbursement	
Mailing Address 1099 New York Ave NW			11 21 2013	1
Ste 100			11 21 2013	_
City	State Zip Code			
Washington	DC 20001-4452		Transaction ID : D150947	
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Office Sought: House Disburse Senate	ment For: Primary General			
President	Primary General Other (specify) ▼			
State: District:	Caron (openiny)			
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B.			Date of Disbursement	
			M M / D D / Y Y Y Y	-
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
. arposo or biobursoment			Amount of Each Disbursement this Pe	eriod
Candidate Name		Catagory!		
		Category/ Type		
Office Sought: House Disburse	ment For:		·	
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			D (D)	
C.			Date of Disbursement	
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Mailing Address				_
City	State Zip Code			
•	,			
Purpose of Disbursement				
	Candidate Name			eriod
Candidate Name				
Office Cought	mant Fam	Туре		
Office Sought: House Disburse Senate	ment For:			
President	Primary General Other (specify) ▼			
State: District:	Carior (Specify)			
2.6				_
SUBTOTAL of Disbursements This Page (optional).			94.3	7
222 2 2 2.356.05.110110 7 ago (optional).				#
TOTAL This Period (last page this line number only)		1292.8	9

SC	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 35 OF 42
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		for each category of the Detailed Summary Page	`	22 🗙 23 24 25 26
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	y information copied from such Reports and Staten			
\vdash	for commercial purposes, other than using the name	ne and address of any political	tical committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	D !'' A '' O	***	
/	American Health Care Association	Political Action Co	mmittee	
<u></u>	Full Name (Last, First, Middle Initial)			
_	BOEHNER FOR SPEAKER COMM	/ITTEE		Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 320 First Street, SE			11 11 2013
	City	State Zip Code		
	WASHINGTON	DC 20003		Transaction ID : D150374
	Purpose of Disbursement			
	Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/	10000.00
	Office Sought: House Disburser	nent For:	Туре	
	Senate	Primary General		
	President	Other (specify) ▼		
	State: District:			
_	Full Name (Last, First, Middle Initial)			
B. DONNA CHRISTENSEN CAMPAIGN				Date of Disbursement
	Mailing Address PO Box 5197			11 11 2013
	Maining Address PO Box 3197			11 2310
	City	State Zip Code		Transaction ID : D150377
	St Croix Purpose of Disbursement	VI 00823-5197	1	
	Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/	
	Del. Donna M.C. Christensen		Type	2500.00
	Office Sought: House Disbursen	nent For: 2014		
		Primary General		
	President State: VI District: 00	Other (specify) ▼		
_	Full Name (Last, First, Middle Initial)			
_	FRIENDS OF PATRICK MURPHY			Date of Disbursement
	THE HE OF THE HOLD THE			M M / D D / Y Y Y
	Mailing Address 4521 PGA BLVD. #412			11 18 2013
	City	State Zip Code		
	Palm Beach Gardens	FL 33418		Transaction ID : D150538
	Purpose of Disbursement			
	Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/	1500.00
	Patrick Murphy Office Sought: House Disburser	nent For: 2014	Туре	
	Senate Sought.	Primary General		
	President	Other (specify) ▼		
_	State: FL District: 18			
	•			
S	JBTOTAL of Disbursements This Page (optional)			14000.00
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SC	HEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 36 OF 42					
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			Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b
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	for commercial purposes, other than using the name								
	NAME OF COMMITTEE (In Full)								
	American Health Care Association	Politica	Action Con	nmittee					
_	Full Name (Last, First, Middle Initial)				Doto o	f Disburser	mont		
A.	GREAT LAND PAC							Y	V
	Mailing Address 700 13TH STREET, NW				11	01		2013	Y
	SUITE 600								
	,	State DC	Zip Code 20005		Trans	action ID :	D148973		
	WASHINGTON Purpose of Disbursement	DC	20005						
	Contribution				Amoun	t of Each [Disburseme	nt this I	Period
	Candidate Name			Category/	_			E000	00
				Туре		-		5000	.00
	Office Sought: House Disbursen Senate		General						
	President	Primary Other (spec							
	State: District:	Cirioi (opo	o.i.y) ∀						
	Full Name (Last, First, Middle Initial)								
B.	JAZZ PAC				Date o	f Disburser		YIY	V
	Mailing Address 607 14th Street NW Suite 800 SUITE 800				11	06		2013	
	Washington	State DC	Zip Code 20005		Trans	saction ID	: D149055		
	Purpose of Disbursement Contribution				Amoun	t of Each [Disburseme	nt this I	Period
•	Candidate Name			Category/ Type				2500	0.00
	Office Sought: House Disbursen	nent For:							
		Primary	General						
	President State: District:	Other (spec	city) 🔻						
_	Full Name (Last, First, Middle Initial)								
C.	LONE STAR LEADERSHIP PAC				Date of	f Disburser	ment		
	Mailing Address 7045 MC				M = M	/ D 10		Y Y	Υ
	Mailing Address 7315 Wisconsin Avenue Suite 310 East				11	18		2013	
		State	Zip Code		T	notice In	D150540		
	Bethesda	MD	20814		ırans	action ID	150540 ניט		
	Purpose of Disbursement Contribution								
	Candidate Name			Category/	Amoun	t of Each [Disburseme	nt this I	-
	Office Sought: House Disbursen	nont Ecr		Туре		-		3000	
		nent For: Primary	General						
	President	Other (spe							
	State: District:	(-1-	** *						
	-							-	
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SC	HEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 37 OF 42)F 42
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1	NAME OF COMMITTEE (In Full)								
\angle	American Health Care Association	Political Action C	Comr	nittee					
	Full Name (Last, First, Middle Initial)				5	D: 1			
Α.	Montanans for Lewis		Date of Disbursement				Υ		
1	Mailing Address P.O. Box 1916				11	18	2	2013	
	•	State Zip Code			Tranca	ction ID : D	150537		
	Billings	MT 59103			ITalisa	CHOILID . D	130337		
ŀ	Purpose of Disbursement Contribution		П		Amount	of Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/				1000	00
	John Lewis			Туре		7	7	1000	.00
(nent For: 2014 Primary Gener Other (specify) ▼	ral						
5	State: MA District: 00								
F	Full Name (Last, First, Middle Initial)								
B.	Braley for Iowa				Date of	Disburseme		Y	V
- !	Mailing Address P.O. Box 856				11	06		2013	
I	Des Moines	State Zip Code IA 50304			Transa	ction ID : D	149057		
Ī	Purpose of Disbursement Contribution		П		Amount	of Each Dis	sbursemer	nt this F	Period
	Candidate Name Bruce Braley		7	Category/ Type				5000	.00
		nent For: 2014		Турс		7	,		
		Primary Gener Other (specify)	al						
	State: IA District:								
_	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS				Date of	Disburseme	ent		
_					M M	/ D D	/ Y	ΥΥΥ	Υ
ľ	Mailing Address 5915 Eastman Avenue Suite 100				11	11	2	2013	
	City S Midland	State Zip Code MI 48640			Transa	ction ID : D	150376		
Ī	Purpose of Disbursement Contribution		Г		Amount	of Each Dis	churcomor	nt thic [Pariod
(Candidate Name			Category/	Amount	JI LACII DIS	soui seinei	11 11115 1	enou
	Rep. Dave Camp			Type	1			5000	.00
Ō	Office Sought: House Disbursen	nent For: 2014 Primary Gener Other (specify)	ral			7	-,		
_	State: MI District: 04								
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SCHEDULE B (FEC Form 3X)		NUMBER:	ER: PAGE 38 OF 42			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	nedule(s) (check only one)		04 🗆 05 — 55		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 30b		
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or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
American Health Care Association	Political Action Con	nmittee				
Full Name (Last, First, Middle Initial)			Date of Did			
A. CUMMINGS FOR CONGRESS C.	AMPAIGN COMMIT	IEE	Date of Disbursement			
Mailing Address PO BOX 1631			11 01	2013		
City	State Zip Code		Transaction ID : D1	40074		
BALTIMORE	MD 21203		Transaction ID: DT	40974		
Purpose of Disbursement Contribution			Amount of Each Disb	ursement this Period		
Candidate Name		Category/		5000.00		
Rep. Elijah E. Cummings Office Sought: House Disburse	ment For: 2014	Туре		333.00		
Senate President	Primary General Other (specify)					
State: MD District: 07						
Full Name (Last, First, Middle Initial)						
B. CONNOLLY FOR CONGRESS			Date of Disbursement			
Mailing Address 3706 PRADO PLACE			11 / 18	2013		
City FAIRFAX	State Zip Code VA 22031		Transaction ID : D1	50535		
Purpose of Disbursement Contribution			Amount of Each Disb	ursement this Period		
Candidate Name		Category/		1000.00		
Rep. Gerald E. Connolly		Туре		1000.00		
	ment For: 2014 Primary General Other (specify)					
Full Name (Last, First, Middle Initial)						
C. JIM RENACCI FOR CONGRESS			Date of Disbursement	t		
Mailing Address 150 Smokerise Drive			11 / D D D	2013		
City Wadsworth	State Zip Code OH 44281		Transaction ID : D1	50375		
Purpose of Disbursement						
Contribution		L	Amount of Each Disb	ursement this Period		
Candidate Name		Category/		4500.00		
Rep. James B. Renacci	mont For: 0044	Туре		4000.00		
Senate President	ment For: 2014 Primary					
State: OH District: 16						
SUBTOTAL of Disbursements This Page (optional).				10500.00		
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 39 OF 42			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b	22 X 23 24			
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Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	·					
American Health Care Association	n Political Action Com	nmittee				
Full Name (Last, First, Middle Initial)			Data of Distance and			
A. JIM RENACCI FOR CONGRESS			Date of Disbursement			
Mailing Address 150 Smokerise Drive			11 / 11 / 2013			
City	State Zip Code		Transaction ID : D151	022		
Wadsworth	OH 44281		Transaction iD . D151	032		
Purpose of Disbursement Contribution			Amount of Each Disbur	sement this Period		
Candidate Name		Category/		500.00		
Rep. James B. Renacci Office Sought: House Disburs	ement For: 2014	Туре		333.33		
Office Sought: House Disbursi Senate President	Primary General Other (specify)					
State: OH District: 16						
Full Name (Last, First, Middle Initial)						
B. MICHAEL BURGESS FOR CONC	GRESS		Date of Disbursement	Y Y Y Y		
Mailing Address PO Box 2334			11 18	2013		
City Denton	State Zip Code TX 76202		Transaction ID : D150	0539		
Purpose of Disbursement Contribution			Amount of Each Disbur	sement this Period		
Candidate Name		Category/		3000.00		
Rep. Michael C. Burgess	_	Type		3000.00		
	ement For: 2014 Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. FITZPATRICK FOR CONGRESS			Date of Disbursement			
Mailing Address PO Box 185			11 18	2013		
City	State Zip Code		Transaction ID : D150	1526		
Langhorne	PA 19047		Transaction ib . bisc	7550		
Purpose of Disbursement Contribution						
Candidate Name	Candidate Name			sement this Period		
Rep. Michael G. Fitzpatrick		Category/ Type		2500.00		
Office Sought: House Disburs	ement For: 2014 Primary General Other (specify)	- 1,7,2				
State: PA District: 08						
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SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:			NUMBER: PAGE 40 OF 42
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check only	NOMBEIT.
	for each category of the Detailed Summary Page 21b 22 23		22 🗙 23 🗆 24 🗆 25 🖂 26
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NAME OF COMMITTEE (In Full)	Dalida da Arda A		
American Health Care Association	Political Action Co	mmittee	
Full Name (Last, First, Middle Initial)			
A. MIKE THOMPSON FOR CONGRI	ESS		Date of Disbursement
Mailing Address 5429 Madison Avenue			11 18 2013
Mailing Address 5429 Madison Avenue			11 10 2013
City	State Zip Code		Transaction ID : D150534
Sacramento	CA 95841		Transaction ib . b130334
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name			Amount of Each bisbursement this renou
Rep. Mike Thompson		Category/ Type	2000.00
	ment For: 2014	21	, ,
Senate X	Primary General		
President	Other (specify) ▼		
State: CA District: 05			
Full Name (Last, First, Middle Initial) B. DUFFY FOR CONGRESS			Date of Disbursement
5. DUFFT FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address PO Box 538			11 11 2013
City Wausau	State Zip Code WI 54402		Transaction ID : D150373
Purpose of Disbursement	34402		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Sean P. Duffy		Туре	1000.00
Office Sought: House Disburse Senate	ment For: 2014 Primary		
President	Other (specify)		
State: WI District: 07	(apassy) V		
Full Name (Last, First, Middle Initial)			
C. ROSA PAC			Date of Disbursement
Mailian Address 100 O. O. V. LA. OW			M M / D D / Y Y Y Y
Mailing Address 499 S. Capitol Ave., SW			11 06 2013
City	State Zip Code		Transaction ID - D440050
Washington	DC 20003		Transaction ID: D149058
Purpose of Disbursement Contribution			
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	1000.00
Office Sought: House Disburse	ment For:	7,5-5	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
CURTOTAL of Dishursements This Days (and 1)			4000.00
SUBTOTAL of Disbursements This Page (optional).		<u> </u>	
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 41 OF 4					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b				
		27					
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NAME OF COMMITTEE (In Full)							
American Health Care Association	Political Action Com	nmittee					
Full Name (Last, First, Middle Initial)							
A. DAN COATS FOR INDIANA			Date of Disbursement				
Mailing Address PO BOX 301141			11 06 2013				
City	State Zip Code		Transaction ID - D440056				
INDIANAPOLIS	IN 46230		Transaction ID : D149056				
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Sen. Dan Coats	_	Туре	1000.00				
X Senate	nent For: 2016 Primary General Other (specify)						
State: IN District:	·						
Full Name (Last, First, Middle Initial)							
B. FRIENDS FOR HARRY REID			Date of Disbursement				
Mailing Address P.O. BOX 19163			11 01 2013				
LAS VEGAS	State Zip Code NV 89132		Transaction ID : D148975				
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period				
Candidate Name		Category/	5000.00				
Sen. Harry Reid		Туре	5000.00				
X Senate	nent For: 2016 Primary General Other (specify)						
State: NV District:	, , , , , , , , , , , , , , , , , , ,						
Full Name (Last, First, Middle Initial) C. TEAM GRAHAM INC			Date of Disbursement				
Mailing Address PO BOX 1801			11 06 7 9 9 9				
•	State Zip Code		Transaction ID : D149053				
COLUMBIA Purpose of Disbursement Contribution	SC 29202						
			Amount of Each Disbursement this Period				
Sen. Lindsey Graham	Candidate Name Category Croham						
	nent For: 2014	Туре					
Senate President	Primary General Other (specify) ▼						
State: SC District:							
SUBTOTAL of Disbursements This Page (optional)		·····•	7000.00				
TOTAL This Period (last page this line number only)		·····	65000.00				

SCHEDULE B (FEC Form 3X)	CHEDULE B (FEC Form 3X)		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
I I LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 23 24 25 26
	Detailed Summary Page	27	X 28a 28b 28c 29 30b
Any information copied from such Reports and Staten	nents may not be sold or use	ed by any ners	
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Health Care Association	Political Action Com	nmittee	
Full Name (Last, First, Middle Initial)			
A. MICHELE DENNIS RN			Date of Disbursement
Molling Address CT W. L. (1.1.7.)			M M / D D / Y Y Y Y Y Y Y Y Y Y
Mailing Address 35 Wakefield Drive			11 06 2013
City	State Zip Code		
Newark	DE 19711		Transaction ID : D150964
Purpose of Disbursement			
Refund of 10/30/2013 contribution		L I	Amount of Each Disbursement this Period
Candidate Name		Category/	150.00
000		Туре	130.00
Office Sought: House Disbursen			
	Primary General Other (specify) ▼		
State: District:	Oniei (specify)		
Full Name (Last, First, Middle Initial)			
B.			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
i dipose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Cotogogy	111111111111111111111111111111111111111
		Category/ Type	
Office Sought: House Disbursen	nent For:		
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Data of Bishamana
C.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
Maining Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name			Amount of Each Disbursement this Period
Candidate Iname		Category/	
Office Sought: House Disbursen	nent For:	Туре	
	Primary General		
	Other (specify)		
State: District:	· · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			150.00
TOTAL This Period (last page this line number only)			150.00